

United States of America
Department of Transportation — Federal Aviation Administration
Supplemental Type Certificate

Number SA1819SW

Project T2636SW-DS
JDS-213

This certificate, issued to Qualitron Aero, Inc.
P. O. Box 60374
John F. Kennedy Blvd.
Houston, Texas 77060

certifies that the change in the type design for the following product with the limitations and conditions therefor as specified hereon meets the airworthiness requirements of Part 4b of the Civil Air Regulations.

Original Product — Type Certificate Number: A2SW
Make: Israel Aircraft, Ind.
Model: 1121B

Description of Type Design Change: Installation of Collins FGS-105 consisting of dual FD109 Flight Directors and AP105 Autopilot and associated Qualitron Aero, Inc. Switching System according to Qualitron Aero, Inc. Drawing List 73T-6120-1400 Revision D dated April 26, 1974.

Limitations and Conditions:

FAA Approved Airplane Flight Manual Supplement dated March 22, 1974, is required for Switching System.

FAA Approved Airplane Flight Manual Supplement dated March 22, 1974, is required for Category I and II operation.

This certificate and the supporting data which is the basis for approval shall remain in effect until surrendered, suspended, revoked, or a termination date is otherwise established by the Administrator of the Federal Aviation Administration.

Date of application: April 2, 1973

Date reissued:

Date of issuance: May 2, 1974

Date amended:



By direction of the Administrator
Don P. Watson
(Signature)

Don P. Watson
Acting Chief, Engineering and Manufacturing Branch
(Title)

Any alteration of this certificate is punishable by a fine of not exceeding \$1,000, or imprisonment not exceeding 3 years, or both.

This certificate may be transferred in accordance with FAR 21.47.

INSTRUCTIONS: The transfer endorsement below may be used to notify the appropriate FAA Regional Office of the transfer of this Supplemental Type Certificate.

The FAA will reissue the certificate in the name of the transferee and forward it to him.

TRANSFER ENDORSEMENT

Transfer the ownership of Supplemental Type Certificate Number _____

to (Name of transferee) _____

(Address of transferee) _____

(Number and street)

(City, State, and ZIP code)

from (Name of grantor) (Print or type) _____

(Address of grantor) _____

(Number and street)

(City, State, and ZIP code)

Extent of Authority (if licensing agreement): _____

Date of Transfer: _____

Signature of grantor (In ink): _____